

08-28-01

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification [Total Pages **01**]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure

4. Drawing(s) (35 U.S.C. 113) [Total Sheets **01**]

5. Oath or Declaration [Total Pages **01**]
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 i. **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. Application Data Sheet. See 37 CFR 1.76

Attorney Docket No.	
First Inventor	Henri Duong
Title	Automatic Braking System...
Express Mail Label No. EK.838336814 US	

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*
 a. Computer Readable Form (CRF)
 b. Specification Sequence Listing on:
 i. CD-ROM or CD-R (2 copies); or
 ii. paper
 c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
 10. 37 CFR 3.73(b) Statement Power of Attorney
 11. English Translation Document *(if applicable)*
 12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
 13. Preliminary Amendment
 14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
 15. Certified Copy of Priority Document(s) *(if foreign priority is claimed)*
 16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
 17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

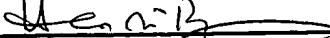
Continuation Divisional Continuation-in-part (CIP) of prior application No. _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<small>(Insert Customer No. or Attach bar code label here)</small>			or	<input checked="" type="checkbox"/> Correspondence address below
Name	Henri Duong 4627 Louise Avenue				
Address					
City	Whitehall	State	OHIO	Zip Code	43213
Country	U.S.A.	Telephone	(614) 5018544	Fax	

Name (Print/Type)	Henri Duong	Registration No. (Attorney/Agent)
Signature		
	Date	08/24/2001

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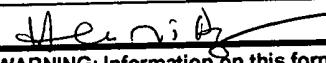
FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 515)

Complete if Known

Application Number	
Filing Date	
First Named Inventor	Henri Duong
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																																																																																														
<p>1. <input type="checkbox"/> - The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <input type="text"/></p> <p>Deposit Account Name <input type="text"/></p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>				<p>3: ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Fee Code (\$)</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65 Surcharge - late filing fee or oath</td><td><input type="text"/></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25 Surcharge - late provisional filing fee or cover sheet</td><td><input type="text"/></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130 Non-English specification</td><td><input type="text"/></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520 For filing a request for ex parte reexamination</td><td><input type="text"/></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920* Requesting publication of SIR prior to Examiner action</td><td><input type="text"/></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840* Requesting publication of SIR after Examiner action</td><td><input type="text"/></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55 Extension for reply within first month</td><td><input type="text"/></td></tr> <tr><td>116</td><td>390</td><td>216</td><td>195 Extension for reply within second month</td><td><input type="text"/></td></tr> <tr><td>117</td><td>890</td><td>217</td><td>445 Extension for reply within third month</td><td><input type="text"/></td></tr> <tr><td>118</td><td>1,390</td><td>218</td><td>695 Extension for reply within fourth month</td><td><input type="text"/></td></tr> <tr><td>128</td><td>1,890</td><td>228</td><td>945 Extension for reply within fifth month</td><td><input type="text"/></td></tr> <tr><td>119</td><td>310</td><td>219</td><td>155 Notice of Appeal</td><td><input type="text"/></td></tr> <tr><td>120</td><td>310</td><td>220</td><td>155 Filing a brief in support of an appeal</td><td><input type="text"/></td></tr> <tr><td>121</td><td>270</td><td>221</td><td>135 Request for oral hearing</td><td><input type="text"/></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510 Petition to institute a public use proceeding</td><td><input type="text"/></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55 Petition to revive - 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Name (Print/Type)	Henri Duong		Registration No. (Attorney/Agent)			Telephone	614) 501 8544																																																																																																																																																											
Signature			Date	08/24/2001																																																																																																																																																														

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Bob Taft
Governor

Jacqueline Romer-Sensky
Director



OHIO DEPARTMENT OF JOB AND FAMILY SERVICES

145 South Front Street
P.O. Box 1618
Columbus, Ohio 43216-1618

JC903 U.S. PRO
09/94 3930
08/27/01



Name and address

Henri Duong
4627 Louise Ave
Whitehall OH 43213

Date: 8-21-01

ss#: 065-90-4950

52 Robinwood Avenue
P.O. Box 13449
Columbus, OH 43213-0449

Dear Claimant:

Information has been requested from your unemployment file by

Claimant

Under the provisions of the Ohio law, the Ohio Department of Job and Family Services is prohibited from releasing this information as requested. Therefore, the information being requested is being issued to you to do with as you deem proper.

Field office records indicate the following:

Application date:

1-30-01

Benefit year beginning date:

1-28-01

Dependency class:

B

Weekly benefit amount:

94⁰⁰

Total benefits payable:

1880⁰⁰

Last week paid:

31-01

Amount of last payment:

51⁰⁰

Date of last payment:

7-25-01

Remaining balance:

503⁰⁰

Current eligibility:

In Active

Other:

Sincerely,


Shirley Custom Service